



**Maricopa County Environmental Services Department
Environmental Health Division – Plan Review Program
New Business Permit Application**

**1001 N. Cental Ave. #300 Phoenix, AZ 85004 phone: (602)506-6980
<http://www.maricopa.gov/envsvc/envhealth>**

To open a food/drink service establishment, public school, hotel, or pet shop/pet groomer, you must complete one of the 3 following processes to obtain a permit to operate.

- A. If you are constructing a new business, remodeling a previously permitted establishment or you will be operating from a fully completed space (e.g. church kitchen) that has never held a Maricopa County Environmental Services Department (Department) permit to operate, you must complete and submit a Plan Review Application, the required fee and your plans to the Department prior to beginning construction/modification. Please visit the [plan review program website](#) to view forms and instructions on how to complete this process.
- B. If you are purchasing an existing business permitted by this Department, are re-opening a previously closed business, or are opening a business in a shared/commissary facility, you must complete and submit the New Business Permit Application along with the fee to the Plan Review Program located at the above address. Business hours are Monday through Friday from 8am to 5pm. **All applications must be submitted in person. Mailed applications will not be processed.** At the time of your application submittal, an inspection request will be logged and an inspector will call you to confirm the inspection. The inspection will be conducted to evaluate the facility for compliance. If the facility meets current Maricopa County Environmental Health Code (MCEHC) standards at the time of inspection, the operating permit will be approved.
- C. If your business was posted closed by the Department due to permit fee payment lapses, your permit is invalid. To obtain a new permit, you are required to apply for a New Business Permit and must follow all instructions described in paragraph B above.

As stated above, the facility must meet current MCEHC standards. The Environmental Health Code does not 'grandfather' any part of an establishment regardless of the current condition or how the existing business was originally permitted. All new permits must meet and/or upgrade to current code standards. If the establishment does not meet minimum standards, a Cease & Desist Order will be requested. Once the Order is in place, the business must close and remain closed until the Department provides the facility owner formal approval to open. Additionally, if noncompliance areas are extreme, a plan submittal for repairs will be required.

No application for permit shall receive approval, no permit shall be issued and no facility for which a permit is required shall be placed in operation until the applicant demonstrates to the Department full compliance with the provisions of this Environmental Health Code.

Although all permit holders must comply with the Environmental Health Code, operators may require Department guidance to effectively evaluate an establishment to determine if it meets current standards. The Department offers an evaluation tool that prospective operators can utilize, prior to acquiring ownership or entering into a lease agreement. This tool is referred to as an [Inspection Upon Request](#) and requires a \$240 fee. **If the prospective business is still in operation, the application must be completed and signed by the current business owner, not the prospective owner.** If the business is closed and does not currently possess a valid Department permit, the prospective owner should complete and submit the Inspection Upon Request application. The inspection will provide the applicant a written report of noncompliant issues.

In addition, a prospective owner may review Department public facility records upon request. If you have questions or concerns regarding the opening of a new business, please review the [Plan Review Minimum Requirements for Establishments](#) and the [Construction Guide](#) found on the Plan Review Program website.



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ILLEGIBLE OR INCOMPLETE APPLICATIONS WILL BE REJECTED!

PROVIDE BUSINESS & OWNER INFORMATION BELOW (Please Print)

Business Name:

Business Address:

City:

Zip Code:

Business Phone:

Business Fax:

Business Owner Name (e.g. LLC, Corp, or Sole Proprietor):

Business Owner Address:

City:

State:

Zip Code:

Business Owner Phone:

Business Owner Fax:

Business Owner Email:

Billing Name:

Billing Address:

City:

State:

Zip Code:

Billing Phone:

Billing Fax:

Billing Email:

Please provide the following information for inspection requests:

Contact Name:

Phone:

Effective Date of Owner Change:

Please provide the following information

All Permit Types						
Hours of Operation:						
Type of Water Service (<i>circle one</i>): Municipal Well Other						
Name of Water Service Provider / PWS #:						
Type of Sewer Service (<i>circle one</i>): Municipal Septic System Other						
Name of Sewer Service Provider / Permit #:						
Food Service Permits						
Menu Type (<i>circle up to 3</i>): American Hispanic Asian German Indian African Arabic Vegetarian Other						
Type of Service (<i>circle one</i>): All Day Service Breakfast Only Lunch Only Dinner Only Breakfast & Lunch Lunch & Dinner 24 Hour Service Other						
Seating Capacity:						
Water Heater Capacity (ga.):				Recovery Rate (ga./hr):		
Do you provide an outdoor smoking patio?				Yes	No	
Will there be any outdoor food or bar service?				Yes	No	
Are there any doors or wall systems leading to the outside that are not self-closing?						Yes No
Will you be conducting any of the following processes (<i>circle all that apply</i>)?						
Vacuum Packaging	Canning or Jarring	Bare Hand Contact	Acidifying Foods	Smoking Meats		
Public Accommodation Permits						
Type of Operation (<i>circle one</i>): Hotel/Motel Boarding Home Bed & Breakfast Other						
Number of Rooms/Units:			Do you provide patrons multiuse glassware? Yes No			
Do any rooms have kitchenettes which include reusable dishware? Yes No						
Public School Ground Permits						
Type of School (<i>circle one</i>): Public Charter Grade levels:						
Population	Male Students:		Female Students:		Staff:	
Is food or other concession service provided on the grounds?					Yes	No
Pet Shop/Groomer Permits						
Type of Operation (<i>circle one</i>): Pet Shop Pet Groomer						

Delivery of Inspection Reports

Pursuant to A.R.S. § 41-1009, the Department may enter your establishment to conduct inspections. You have the right to receive a copy of the Department's inspection report at the time of the inspection, within thirty (30) days after the inspection, or as otherwise provided by federal law. By signing below, I agree that the Department may send me a copy of its inspection report by e-mail to the following email address or by facsimile transmission to the following fax number. It is the responsibility of the permit holder to update the Department if there is a change in contact information.

Email Address:	
Fax Number:	Signature:

I hereby certify that the above information is correct and these documents comply with the Maricopa County Health Code, and I fully understand that any deviation from the above without prior permission from this Environmental Health Regulatory Office may nullify final approval.

Signature

Printed Name

Date

NOTE: Approval of the permit(s) by this Regulatory Authority does not indicate compliance with any other code, law or regulation that may be required--federal, state, or local.

Office Use Only

Application Fees (*Effective 8/1/10 and are subject to change.*)

Quantity	Application Type	Fee	Total Fee
	New Business Permit Application	\$315	\$

Total Fees Due	\$
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Business Name:		
Business Address:		
Plan Review District:		
Site Location:		
Permit Number	Permit Type	Classification